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CONFIRMATION NO. 4659

SERIAL NUMBER 10/028,874	FILING OR 371(c) DATE 10/22/2001 RULE	CLASS 709	GROUP ART UNIT 2152	ATTORNEY DOCKET NO. 4366-43
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APPLICANTS

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** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

N/A Left.

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **

01/29/2002

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY AUSTRALIA	SHEETS DRAWING 4	TOTAL CLAIMS 30	INDEPENDENT CLAIMS 6
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>Left</i>				

ADDRESS

48500

TITLE

Real time control protocol session matching

FILING FEE RECEIVED 1172	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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